Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

		SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY					
FO	R	NUMBE	R FILED		UMBER EXTRA		FEE		RATE	FEE
BAS	SIC FEE						345.00	OR		690.00
то	TAL CLAIMS	33	3 minus 2	0= 13	1	X\$ 9=		OR	X\$18=	234.
	EPENDENT CL		minus 3	3 = *		X39=		OR	X78=	78
MULTIPLE DEPENDENT CLAIM PRESENT						+130=		OR	+260=	
* If the difference in column 1 is less than zero, enter "0" in column 2					olumn 2	TOTAL		OR	TOTAL	1002
CLAIMS AS AMENDED - PART II (Column 1) (Column 2				- PART II (Column 2)	(Column 3)	SMALL E	NTITY	or	OTHER SMALL E	ENTITY
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**	=	X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***	=	X39=		OR	X78=	<u></u>
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDENT CLAIM		+130=		OR	+260=	
						TOTAL		┤ ू∖	TOTAL ADDIT. FEE	
		(Column 1)		(Column 2)	(Column 3)	ADDIT. FEE		.	חטטוו. FEE	
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
DME	Total	*	Minus	**	=	X\$ 9=		OR	X\$18=	
AMENDMENT	Independent	*	Minus	***	=	X39=		OR	X78=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT CLAIN	1	+130=		OR	+260=	
						TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)	_	(Column 2)	(Column 3)			•		
S TNE		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
DME	Total	*	Minus	**	=	X\$ 9=		OR	X\$18=	
AMENDMENT	Independent		Minus	***	=	X39=		OR	X78=	1
 ⁴	FIRST PRESI	ENTATION OF M	NULTIPLE DE	PENDENT CLAIR	И			1		1
1.	If the entry in col-	umn 1 is less than	the entry in col	umn 2, write "0" in o	olumn 3.	+130= TOTAL	 	OR	TOTAL	
	* If the "Highest Nu	umber Previously F	Paid For" IN TH	HIS SPACE is less the HIS SPACE is less to the Independent is less to the Independent is the HIS SPACE is less than 100 to 100 t	han 20, enter "20." han 3. enter "3."	ADDIT. FEE	<u></u>	JOR ox in co	ADDIT. FEE	

This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 09.479105

FORM OIPE-RAM-01 (Rev. 12/97)

Total Fee Calculation

	Fee Cade	Total # Claims	Number Extra	Х	Fee	Fee	<u>.</u>	Total
_	Sm./Lg.				Sm. Entity	Lg. Entity		
Basic Filing Fee	201/101					<u>690.</u> -	*	690,-
Total Claims >20	203/103	<u>33</u> -20 -	<u>13</u>	Х		18.	-	234.
Independent Claims >3	202/102	4 -3.=		х		78.	3	78.
Mult, Dep Claim Present	204/104						=	
Surcharge	205/105	•				130,	,	130,
English Translation	139							
TOTAL FEE CALCULA	ATION				·			1132
Fees due upon filing t	he application:							
Total Filing Fees Due	= 5	1132.						
Less Filing Fees Subm	iitted - \$			_				
BALANCE DUE	= \$	113	200	_				
Office of Initial Patent	Sa Examination			٠				
		Fig	ure 7					